

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number

525510

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	46 minus 20 =	26
INDEPENDENT CLAIMS	2 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

2/8/03

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 1)	(Column 2)	(Column 3)
						Total	Minus =
		43	Minus	46				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 1)	(Column 2)	(Column 3)
						Total	Minus =
		2	Minus	3				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 1)	(Column 2)	(Column 3)
						Total	Minus =
		2	Minus	3				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	Fee	RATE	Fee
	345.00		690.00
OR		OR	
X\$ 9=		X\$18=	468 ⁰⁰
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL		TOTAL	1150 ⁰⁰

OTHER THAN
SMALL ENTITY OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
OR		OR	
X39=		X78=	
OR		OR	
+130=		+260=	
OR		OR	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

RAM Fee History
Query
Revenue Accounting and Management

Name/Number: 10728323

Total Records Found: 6

Start Date: Any Date

End Date: Any Date

Accounting Date	Sequence Num.	Tran Type	Fee Code	Fee Amount	Mailroom Date	Payment Method
12/09/2003	00000003	1	<u>2001</u>	\$385.00	12/04/2003	CK
06/25/2004	00000067	1	<u>2051</u>	\$65.00	06/24/2004	CK
06/25/2004	00000068	1	<u>2252</u>	\$210.00	06/24/2004	CK
08/16/2004	00000047	1	<u>8021</u>	\$40.00	08/13/2004	CK
07/08/2005	00000011	1	<u>2251</u>	\$60.00	07/07/2005	CK
07/20/2005	00000003	1	<u>1806</u>	\$180.00	07/08/2005	DA 031721



JFW

ATTORNEY DOCKET NO.: 2002834-0232 (Bacterial Delivery DIV2)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Caplan **Examiner:** Huynh
Serial No.: 10/728,323 **Art Unit:** 1644
Filing Date: December 4, 2003
Title: MICROBIAL DELIVERY SYSTEM

Mail Stop: Amendments
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

TRANSMITTAL LETTER

Enclosed are the following documents:

1. Form PTO-1449 (1 pages);
2. Supplemental Information Disclosure Statement (5 pages);
3. Transmittal Letter (1 page); and
4. Return Postcard.

If any additional fees are required to be paid or if any overpayment has been made, please charge same to Deposit Account No. 03-1721.

Respectfully submitted,

~~Charles E. Lyon, Ph.D.~~
~~Agent for Applicant~~
~~Registration No. 56,630~~

CHOATE, HALL & STEWART, LLP
Exchange Place
53 State Street
Boston, MA 02109
(617) 248-5000
(617) 248-4000
Dated: July 6, 2005

Certificate of Mailing	
<p>I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Mail Stop: Amendments, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p><u>7-6-05</u> <u>Sandra Saccoccia</u></p>	
Date	Signature
<u>Sandra Saccoccia</u>	
Typed or Printed Name of person signing certificate	

3953622



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Sir:

INFORMATION DISCLOSURE STATEMENT

Pursuant to the duty of disclosure under 37 CFR §§ 1.56, 1.97 and 1.98, Applicant requests consideration of this Information Disclosure Statement.

Type of Statement

The present Information Disclosure Statement is:

An *original* Information Disclosure Statement; or

A *supplemental* Information Disclosure Statement.

Certificate of Mailing	
I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
<u>7-10-05</u>	<u>Sandra Saccoccia</u>
Date	Signature
<u>Sandra Saccoccia</u>	
Name of Person Signing	